

and are thus useful as an early diagnostic test, in patient monitoring, and in therapy evaluation.

Molecular Tumor Markers

5 Molecular markers of cancer are products of cancer cells or molecular changes that take place in cells because of activation of cell division or inhibition of apoptosis. Expression of these markers can predict a cell's malignant potential. Because cellular markers
10 are not secreted, tumor tissue samples are generally required for their detection. Non-limiting examples of molecular tumor markers that can be used in the present invention are listed in Table No. 1, below.

15 Table No. 1. Non-limiting Examples of Molecular Tumor Markers

Tumor	Marker
Breast	p53
Breast, Ovarian	ErbB-2/Her-2
Breast	S phase and ploidy
Breast	pS2
Breast	MDR2
Breast	urokinase plasminogen activator
Breast, Colon, Lung	myc family

Chromosomal Tumor Markers

Somatic mutations and chromosomal aberrations have
20 been associated with a variety of tumors. Since the identification of the Philadelphia Chromosome by Nowel

and Hungerford, a wide effort to identify tumor-specific chromosomal alterations has ensued. Chromosomal cancer markers, like cellular markers, are can be used in the diagnosis and prognosis of cancer. In addition to the 5 diagnostic and prognostic implications of chromosomal alterations, it is hypothesized that germ-line mutations can be used to predict the likelihood that a particular person will develop a given type of tumor. Non-limiting examples of chromosomal tumor markers that can be used 10 in the present invention are listed in Table No. 2, below.

Table No. 2. Non-limiting Examples of Chromosomal Tumor Markers

Tumor	Marker
Breast	1p36 loss
Breast	6q24-27 loss
Breast	11q22-23 loss
Breast	11q13 amplification
Breast	TP53 mutation
Colon	Gain of chromosome 13
Colon	Deletion of short arm of chromosome 1
Lung	Loss of 3p
Lung	Loss of 13q
Lung	Loss of 17p
Lung	Loss of 9p

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Serological Tumor Markers

Serum markers including soluble antigens, enzymes and hormones comprise a third category of tumor markers. Monitoring serum tumor marker concentrations during

therapy provides an early indication of tumor recurrence and of therapy efficacy. Serum markers are advantageous for patient surveillance compared to chromosomal and cellular markers because serum samples are more easily obtainable than tissue samples, and because serum assays can be performed serially and more rapidly. Serum tumor markers can be used to determine appropriate therapeutic doses within individual patients. For example, the efficacy of a combination regimen consisting of 5 chemotherapeutic and antiangiogenic agents can be measured by monitoring the relevant serum cancer marker levels. Moreover, an efficacious therapy dose can be achieved by modulating the therapeutic dose so as to keep the particular serum tumor marker concentration 10 stable or within the reference range, which may vary depending upon the indication. The amount of therapy can then be modulated specifically for each patient so as to minimize side effects while still maintaining 15 stable, reference range tumor marker levels. Table No. 20 3 provides non-limiting examples of serological tumor markers that can be used in the present invention.

Table No. 3. Non-limiting Examples of Serum Tumor Markers

Cancer Type	Marker
Germ Cell Tumors	α -fetoprotein (AFP)
Germ Cell Tumors	human chorionic gonadotrophin (hCG)
Germ Cell Tumors	placental alkaline phosphatase (PLAP)
Germ Cell Tumors	lactate dehydrogenase (LDH)